

TEXAS HIGH RODEO ASSOCIATION

REGION X HIGH SCHOOL RCH #1

Mail to: Stephanie Shoemaker
6500 CR 1202
Cleburne, TX 76031
(817) 648-2728 (cell)
Texasregion10@gmail.com

Place: Will Rogers Colliseum
Date: Aug 17th
Time 8 AM
Due Date: Aug 16, 2019

NAME: _____
ADDRESS: _____ CITY/ZIP: _____
PHONE#: _____

CHECK THE EVENTS YOU WISH TO ENTER

EVENTS FOR GIRLS **ENTRY FEES**
Girls Cutting \$ 67 _____

EVENTS FOR BOYS **ENTRY FEES**
Boys Cutting \$ 67 _____

TOTAL ENTRY FEES DUE \$ _____
OFFICE CHARGE
(PER CUTTING) \$ _____ 25.00
STATE OFFICE CHARGE
(PER CUTTING) \$ _____ 2.00
GATE FEE
(PER CUTTING) \$ _____ 10.00
LATE FEE (\$25.00)
(PER CUTTING) \$ _____

TOTAL FEES \$ _____

EVERYONE MUST SELL....

**(1) \$100 REGION AD BY
September 15, 2018**

RAFFLE/ADS TO BE SOLD...

**(1) \$50 BLOOMER TICKET
(15) DODGE TRUCK RAFFLE
TICKETS
(1) \$50 STATE AD
(tbd) CABELA'S RAFFLE TICKETS
(number of required tickets to be sold will
be handed out at first rodeo)**

**THE ABOVE ITEMS MUST BE
TURNED BY OCTOBER 6, 2018
TO RODEO SECRETARY**

****Medical draw outs will be honored ONLY if I am Notified BEFORE the Cutting starts.**

I, the Parent or Guardian of _____ (contestant) give permission to the Physicians on the Medical Staff or the Hospital to administer necessary emergency treatment for injuries He/she may incur while participating in the officially approved High School Rodeos. I understand that each contestant must be and covered by medical insurance. I hereby release the Hospital, Physicians on The Medical Staff, and the Rodeo Sponsors from all liability:

SIGNATURE: _____
(PARENT OR GUARDIAN)

TEXAS HIGH RODEO ASSOCIATION

REGION X HIGH SCHOOL RCH #2

Mail to: Stephanie Shoemaker
6500 CR 1202
Cleburne, TX 76031
(817) 648-2728 (cell)
Texasregion10@gmail.com

Place: Will Rogers Coliseum
Date: Aug 18th
Time: 8 am
Due Date: Aug 16,2019

NAME: _____
ADDRESS: _____ CITY/ZIP: _____
PHONE#: _____

CHECK THE EVENTS YOU WISH TO ENTER

EVENTS FOR GIRLS **ENTRY FEES**
Girls Cutting \$ 67 _____

EVENTS FOR BOYS **ENTRY FEES**
Boys Cutting \$ 67 _____

TOTAL ENTRY FEES DUE \$ _____
OFFICE CHARGE
(PER CUTTING) \$ _____ 25.00
STATE OFFICE CHARGE
(PER CUTTING) \$ _____ 2.00
GATE FEE
(PER CUTTING) \$ _____ 10.00
LATE FEE (\$25.00)
(PER CUTTING) \$ _____

TOTAL FEES \$ _____

****Medical draw outs will be honored ONLY if I am Notified BEFORE the Cutting starts.**

I, the Parent or Guardian of _____ (contestant) give permission to the Physicians on the Medical Staff or the Hospital to administer necessary emergency treatment for injuries He/she may incur while participating in the officially approved High School Rodeos. I understand that each contestant must be and covered by medical insurance. I hereby release the Hospital, Physicians on The Medical Staff, and the Rodeo Sponsors from all liability:

SIGNATURE: _____
(PARENT OR GUARDIAN)

EVERYONE MUST SELL....

**(1) \$100 REGION AD BY
September 15, 2018**

RAFFLE/ADS TO BE SOLD...

**(1) \$50 BLOOMER TICKET
(15) DODGE TRUCK RAFFLE
TICKETS
(1) \$50 STATE AD
(tbd) CABELA'S RAFFLE TICKETS
(number of required tickets to be sold will
be handed out at first rodeo)**

**THE ABOVE ITEMS MUST BE
TURNED BY OCTOBER 6, 2018
TO RODEO SECRETARY**

TEXAS HIGH RODEO ASSOCIATION

REGION X HIGH SCHOOL RCH #3

Mail to: Stephanie Shoemaker
6500 CR 1202
Cleburne, TX 76031
(817) 648-2728 (cell)
Texasregion10@gmail.com

Place: Will Rogers Colliseum
Date: Aug 18th
Time: 8 AM
Due Date: Aug 16,2019

NAME: _____
ADDRESS: _____ CITY/ZIP: _____
PHONE#: _____

CHECK THE EVENTS YOU WISH TO ENTER

EVENTS FOR GIRLS **ENTRY FEES**
Girls Cutting \$ 67 _____

EVENTS FOR BOYS **ENTRY FEES**
Boys Cutting \$ 67 _____

TOTAL ENTRY FEES DUE \$ _____
OFFICE CHARGE
(PER CUTTING) \$ 25.00
STATE OFFICE CHARGE
(PER CUTTING) \$ 2.00
GATE FEE
(PER CUTTING) \$ 10.00
LATE FEE (\$25.00)
(PER CUTTING) \$ _____

TOTAL FEES \$ _____

EVERYONE MUST SELL....

**(1) \$100 REGION AD BY
September 15, 2018**

RAFFLE/ADS TO BE SOLD...
(1) \$50 BLOOMER TICKET
**(15) DODGE TRUCK RAFFLE
TICKETS**
(1) \$50 STATE AD
(tbd) CABELA'S RAFFLE TICKETS
**(number of required tickets to be sold will
be handed out at first rodeo)**

**THE ABOVE ITEMS MUST BE
TURNED BY OCTOBER 6, 2018
TO RODEO SECRETARY**

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SIGNATURE: _____
(PARENT OR GUARDIAN)